

North Carolina Department of Transportation

Active Claim Resolution Form

Contract No.:		Division:	
Claim ID No.:	Issue:	County:	
TID No.			
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	£	Nesident Linginieer.	
	ntract Time: Amount: sation Amount: \$	Department Ir	nitiated
	: Extend Completion Date	e:	Hours Hours
Signature:	: Amount: \$ Name:_		Date:
The CONSTRUCTION UNIT'S	,	(Fredes printy	
Comments:Signature:			Date:
		(Please print)	
The DIVISION ENGINEER'S Extension in Contract Time Denied Granted: Additional Compensation: Denied Granted: Amour Comments:	Extend Completion Date Extend ICT No f	_	Hours Hours
Signature:(Divisio	n Engineer)	(Please print)	Date:

Claim Resolution Form

Requests for Extensions in Contract Time: (Applicable section(s) to be filled out by Resident Engineer)

1.	Has the Contractor submitted all information as required by the Subarticle? Yes No
2.	According to the Contractor:
	What is the alleged controlling operation delayed?
	What are the circumstances resulting in the alleged delay?
	What calendar dates/times was the controlling operation allegedly delayed?through
3.	Resident Engineer's Determination:
	What was the controlling operation?
	Was the controlling operation delayed? ☐ Yes ☐ No
	What are the calendar dates/times the controlling operation was delayed?through
	Was the delay due to circumstances originating from the work required under the contract? Yes No What were the circumstances resulting in delay?
4.	Did the Contractor pursue the work in accordance with Article 108-1? Yes No
_	(This applies to the period prior to the delay or alleged delay.)
5.	Were the delays caused by circumstances beyond the contractor's control and without his fault or negligence? Yes No
6.	Number of days/hours recommended Please explain:
10	8-10(B)4 Changes In The Work Ordered By The Engineer (Additional Work, Etc.)
	Has the Contractor submitted all information as required by the Subarticle? Yes No
1.	Has the Contractor submitted all information as required by the Subarticle? Yes No What is the category of the request?
1. 2.	Has the Contractor submitted all information as required by the Subarticle? Yes No What is the category of the request? Reduction in Quantities Elimination of Items Additional Work Extra Work
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1. 2. 3.	Has the Contractor submitted all information as required by the Subarticle? What is the category of the request? Reduction in Quantities Elimination of Items Additional Work Extra Work According to the Contractor: What is the affected operation? What are the calendar dates/times affected? What time extension is being requested by the Contractor?
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11. 22. 33.	Has the Contractor submitted all information as required by the Subarticle? \[Yes \] No What is the category of the request? \[Reduction in Quantities \] Elimination of Items \[Additional Work \] Extra Work According to the Contractor: \[What is the affected operation? \] \[What are the calendar dates/times affected? \] \[What time extension is being requested by the Contractor? \] Resident Engineer's Determination: \[What is the affected operation? \] \[What are the calendar dates/times affected? \[through \] Did the Contractor pursue the work in accordance with Article 108-1? \[Yes \] No
11. 22. 33.	Has the Contractor submitted all information as required by the Subarticle? What is the category of the request? Reduction in Quantities Elimination of Items Additional Work Extra Work According to the Contractor: What is the affected operation? What are the calendar dates/times affected? What time extension is being requested by the Contractor? Resident Engineer's Determination: What is the affected operation? What are the calendar dates/times affected? through
11. 22. 33.	Has the Contractor submitted all information as required by the Subarticle? \[Yes \] No What is the category of the request? \[Reduction in Quantities \] Elimination of Items \[Additional Work \] Extra Work According to the Contractor: What is the affected operation? What are the calendar dates/times affected?
1. 2. 3.	Has the Contractor submitted all information as required by the Subarticle? \[Yes \] No What is the category of the request? \[Reduction in Quantities \] Elimination of Items \[Additional Work \] Extra Work According to the Contractor: What is the affected operation? What are the calendar dates/times affected?

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Claim Resolution Form

Requests for Additional Compensation: (Applicable section(s) to be filled out by Resident Engineer)

10	4-3 Alterations of Plans or Details of Construction
1. 2. 3.	Has the Contractor submitted all information as required by the Subarticle? Yes No Did the contractor notify the Resident Engineer in writing prior to performing the work? Yes No Date: Did the Department advise the Contractor in accordance with the Subarticle? Yes No No
4.	Did the Contractor submit his claim within 120 days after completion of the work? Yes No
5.6.	Has the Contractor submitted records as required by Subarticle 104-8(B)?
7.	Has the cost of performing the work changed? Yes No Please explain:
8.	Amount of additional compensation recommended \$ Please explain:
10	4-4 Suspension of Work
1.	(a) Was the temporary suspension ordered by the Resident Engineer in writing? Yes No If no, go to (b). If yes: What are the dates of authorized temporary suspension: through Did the contractor notify the Resident Engineer in writing within 7 days of the suspension of his intent to file a claim for
	additional compensation? Yes No Date of Notification: Has the Contractor submitted his written request for adjustment in compensation with cost records, supporting data and information within 14 calendar days of the receipt of the notice to resume work? Yes No Go to 2.
	(b) What was the alleged delay?
	What are the dates of Contractor's alleged suspension:through
	Has the Contractor submitted his written request for adjustment in compensation with cost records, supporting data and information within 14 calendar days after the last day of the period during which he contends the alleged suspension of work should have occurred? Yes No Go to 2.
2.	Has the Contractor submitted records as required by Subarticle 104-8(C)? Yes No (See #3 below) Has the Contractor kept records in accordance with Article 109-3 (Force Account Work)? Yes No
	Did the Contractor give the Resident Engineer the opportunity to review the records? Yes No
	Has the Contractor submitted additional documentation as requested by the Resident Engineer? Yes No N/A
2	Has the Contractor submitted cost records on a weekly basis within 7 days? Yes No
3. 4.	Was the temporary suspension or alleged suspension more than 24 hours in duration? Yes No Amount of additional compensation recommended \$
٦.	Amount of additional compensation recommended \$

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Claim Resolution Form

Requests for Additional Compensation: (Cont'd) (Applicable section(s) to be filled out by Resident Engineer)

10	
10	Extra Work
1.	Has the Contractor submitted all information as required by the Subarticle? Yes No
2.	Did the contractor notify the Resident Engineer in writing prior to performing the work? Yes No Date:
3.	Did the Department advise the Contractor in accordance with the Subarticle? Yes No
4.	Did the Contractor submit his claim within 120 days after completion of the work? Yes No
5.	Amount of additional compensation recommended \$ Please explain:
10	5-11 Inspection of Work
10	Inspection of Work Has the Contractor kept records in accordance with Article 109-3 (Force Account Work)? Yes No
1. 2.	
1.	Has the Contractor kept records in accordance with Article 109-3 (Force Account Work)? Yes No
1.	Has the Contractor kept records in accordance with Article 109-3 (Force Account Work)?
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1. 2.	Has the Contractor kept records in accordance with Article 109-3 (Force Account Work)?
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1. 2.	Has the Contractor kept records in accordance with Article 109-3 (Force Account Work)?
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ACTIVE CLAIM RESOLUTION FORM INSTRUCTIONS:

- 1. Complete the requested project information and the Contractor's request on page 1.
- 2. Review the Contractor's request and complete the applicable Specifications section(s) on pages 2-4.
- 3. After consideration of the Contractor's request, complete the decision section on page 1. Include Project Completion Date/ICT Completion Date extensions and/or additional compensation amounts, as applicable.
- 4. Sign, print your name, and date the form on page 1.
- 5. Enter the decision in HiCAMS Claims Tracking.
- 6. Forward original form, supporting information, and Contractor's claim to the Roadway Construction Engineer or Bridge Construction Engineer. Send a copy of this information to Division Engineer.
- 7. RCE/BCE reviews claim, provides comments, and forwards to the Division Engineer. Cc: the State Construction Engineer.
- 8. Division Engineer reviews claim, makes a final decision. Forward completed form to the Resident Engineer and cc: Bridge Construction Engineer or Roadway Construction Engineer, State Construction Engineer, and FHWA if step by step. (with supporting information and Contractor's claim)
- 9. Resident Engineer is to notify the Contractor in writing with a detailed explanation (ACRF-2 should not be sent to the Contractor).
- 10. Resident Engineer shall submit this **original** completed form with the final estimate.

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